

**Before the
Federal Communications Commission
Washington, DC 20554**

In the Matter of)	
Rural Health Care Support Mechanism)	
)	WC Docket No. 02-60
)	

REPLY COMMENTS BY THE ALLIANCE FOR PUBLIC TECHNOLOGY

The Alliance for Public Technology (“APT”) appreciates the opportunity to submit this brief reply to comments filed in response to the Commission’s Further Notice of Proposed Rulemaking on the Rural Health Care Support Mechanism. APT is a nonprofit organization of public interest groups and individuals, working together to foster broad access to affordable, usable information and communications services and technology, for the purpose of bringing better and more affordable health care to all citizens, expanding educational opportunities for lifelong learning, enabling people with disabilities to be independent and productive members of our society, creating opportunities for jobs and economic advancement, making government more responsive to all citizens and simplifying access to communications technology.¹

¹Dr. Max E. Stachura, the current President of APT’s Board of Directors, is the Director of the Medical College of Georgia Center for Telehealth, and the Georgia Research Alliance Eminent Scholar in Telemedicine.

Support levels for Internet access

Virtually all of the commenters agree that the Commission should increase the support provided for Internet access for rural health care facilities. There does not appear to be a consensus on the level of support that should be available, however.

APT believes that the ability to transmit data and images at high speeds in both directions is increasingly critical to the productive delivery of health care. Discounts above 25 percent should be available, so long as these increased discounts are utilized for high-speed services. The American Hospital Association recommends that the discounts offered should be similar to the levels of the FCC's Schools and Libraries Support Mechanism for rural locations, which range from 25 to 90 percent. APT supports AHA's recommendations, so long as discounts above 25 percent are required to be utilized for Internet access via broadband connections, rather than dial-up access.

Other telecommunications services for mobile rural health care providers

There did appear to be a consensus among the parties who addressed the issue of whether the Commission should modify its rules to allow mobile rural health care providers to use services other than satellite. APT agrees with these commenters that the FCC's rules should not limit discounts for mobile rural health care providers to satellite connections.

Support for infrastructure development

While the majority of the commenters recommend that the program offer support for infrastructure development, there was no consensus on the parameters of such support. APT believes that the first priority of the program should be support for broadband Internet access services. To the extent that Internet access support does not exceed the program's annual funding cap, then the program can make support available for infrastructure development. APT agrees with the American Telemedicine Association that such support, however, should be made available only for infrastructure upgrades within rural health care organizations themselves, not for upgrades to the public switched or backbone networks.

Conclusion

The Rural Health Care program is a comparatively small, but vital, element of our nation's efforts to ensure that "advanced telecommunications capability is being deployed to all Americans in a reasonable and timely fashion."² APT appreciates the Commission's efforts to ensure that the rules for this program remain competitively neutral, technically feasible, and economically reasonable.³

May 9, 2005

² Section 706 of the Telecommunications Act of 1996, 47 U.S.C. §157.

³ 47 U.S.C. §254 (h)(2).

Respectfully Submitted:

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